

APPLICATION DATA SHEET**Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?:

Computer Readable Form (CRF)?:: No

Number of copies of CRF::

Title :: SPINAL NEEDLE SYSTEM

Attorney Docket Number:: 170134.401C1

Request for Early Publication?: No

Request for Non-Publication?: No

Suggested Drawing Figure::

Total Drawing Sheets:: 13

Small Entity?: Yes

Petition included?: No

Petition Type::

Licensed U.S. Gov't Agency::

Contract or Grant No::

Secrecy Order in Parent Appl.?: No

First Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Vincent
Middle Name:: E.
Family Name:: Bryan
Name Suffix::
City of Residence:: Mercer Island
State or Province of Residence:: WA
Country of Residence:: US
Street of mailing address:: 4624 E. Marginal Way
City of mailing address:: Mercer Island
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98040

Second Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Alex
Middle Name::
Family Name:: Kunzler
Name Suffix::
City of Residence:: Issaquah
State or Province of Residence:: WA
Country of Residence:: US
Street of mailing address:: 22748 S.E. 43rd Court

City of mailing address:: Issaquah
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98029

Third Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Daniel
Middle Name:: R.
Family Name:: Baker
Name Suffix::
City of Residence:: Seattle
State or Province of Residence:: WA
Country of Residence:: US
Street of mailing address:: 13203 39th Avenue N.E.
City of mailing address:: Seattle
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98125-4615

Correspondence Information

Correspondence Customer Number :: **00500**

Representative Information

Representative Customer Number::		00500
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Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-In-Part of	10/039,240	01/04/02

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	

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